

PATENT NUMBER

U.S. UTILITY PATENT APPLICATION

O.I.P.E. SCANNED <i>[Signature]</i> Q.A. <i>[Signature]</i>	PATENT DATE
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SECTOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
	435	6	165 164	Chapman MYPG (ad) 4

FILED WITH: ☐ DISK (CRF) ☐ FICHE
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PREPARED AND APPROVED FOR ISSUE

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	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
<input type="checkbox"/> a) The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
<input type="checkbox"/> b) The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____ _____ _____	_____ (Primary Examiner) (Date)			ISSUE FEE	
				Amount Due	Date Paid
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